

# STATE OF WASHINGTON APPLICATION TO ENTER A WATER RIGHT INTO RECEIVED THE TRUST WATER RIGHT PROGRAM

JUL 25 2011

NOTE: THIS FORM IS **ONLY** TO BE USED FOR THE OPERATMENT OF ECOLOGY-CENTRAL REGIONAL OFFICE ACQUISITION OF WATER INTO THE TRUST WATER RIGHT PROGRAM

(Check all that apply.)  ☐ Lease ☐ Purchase ☐ Donation ☐ Other Explain:10 year donation ☐ Portion of the identified existing water right  IF FOR SEASONAL OR TEMPORARY, START DATE _5 / 1 END DATE 10 / 31 END DATE 10 10 10 10	DATE ACCEPTED 07  FEE \$ PRE  CHECK No. SEPA: Exempt				
1. Applicant Information:	HONAL SHEETS (PLEASE PRINT O	K I I PE CLEARLY)""			
APPLICANT/BUSINESS NAME  Chelan Douglas Land Trust-Bob Bugert, Ex	PHONE NO. (509) 667-9708	Fax NO. (509) 667-0719			
ADDRESS P.O. Box 4461					
CITY Wenatchee	STATE WA	ZIP CODE 98807			
CONTACT NAME (IF DIFFERENT FROM ABOVE)  Jason M Hatch, Trout Unlimited	PHONE NO. (509) 888-0970	FAX NO. (509) 888-4352			
ADDRESS 103 Palouse St. Suite #14					
CITY Wenatchee	STATE WA	ZIP CODE 98801			
2. Water Right Information:					
WATER RIGHT OR CLAIM NUMBER WRC 142677	RECORDED NAME(S) Floyd M. Barnhill				
DO YOU OWN THE RIGHT? X YES NO IF NO, P	ROVIDE OWNER(S) NAME and ADD	RESS:			
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FI ARE WATER DIVERSIONS/WITHDRAWALS OF THIS WATER RIGH IMPORTANT! PROVIDE INFORMATION SHOWING THE EXTENT OF	T METERED OR MEASURED?	S X NO			
54-142677CL FOR OFFI	CE USE ONLY				
WATER RIGHT NO	FILE (contract)				
Please attach copies of any documentation that dem	onstrates consistent historical	use of water since the right			

application

CS4-142677CL

was established. Also, if you have a water system plan or conservation plan, please include a copy with your

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Alteration in method of diversion	Alteration in water use/ irrigated acreage
Alteration in method of delivery/conveyance	Nonuse of one or more points of diversion
Alteration in method of water application	Nonuse of all or a portion of the named water right
Alteration in type of crop	Other, Explain below:

### **WATER RIGHT DESCRIPTION**\*

# Point(s) of Diversion/Withdrawal:

4. Point(s) of Diversion/Withdrawal:	laim has f
	Whi or,
WATER RIGHT DESCRIPTION *	is in sel

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

## Purpose of Use:

A. Existing Use of the Water Right

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation	20 gpm	8	May 1 <sup>st</sup> to October 31 <sup>st</sup>
Domestic, Livestock			Continuous

#### **B. Proposed Purpose of the Trust Water Right:**

DESCRIBE THE PURPOSE(S) OF USE DURING THE PERIOD OF TRUST:	
PURPOSE OF USE	ACRE-FEET/YR
Instream Flow/ wildlife benefits	8

#### Place of Use:

All of section 25 T23N R19EWM, except north half of Northeast quarter								
1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL#	# OF ACRES	
SW	NE	25	23N	19E	Chelan County	231925130050 231925420050	2	

<sup>\*</sup> If additional space is needed, please continue on the form: Attachment for Application to Enter a Water Right into the Trust Water Right Program.

# Place of Use (continued) 6. B. Proposed: IDENTIFY THE WATER BODY TO BE BENEFITED OR OTHER PLACE TO BE BENEFITED Groundwater Remarks and Other Relevant Information: This Trust Application seeks to effectuate a donation of the water right to be used exclusively for preservation of environmental and aesthetic values as allowed under RCW Chapters 90.03. 90.42 and 90.58. Therefore, we request expedited processing under WAC 173-152-050(2) (b) and (3) (a). The Donor retains the option to remove the water from the Trust Water Rights program upon notice to Ecology and TU-WWP. Notice must be give prior to February 1 of the irrigation season. Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request. Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477. 8. Signatures: I certify that the information above is true and accurate to the best of my knowledge. I hereby grant staff from the Department of Ecology access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me. (Water Right Holder) 7/19/11 (Land Owner(s) of Existing Place of Use) IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE. WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S): ADDITIONAL SIGNATURES REQUIRED SECTION \_\_\_\_\_ IS INCOMPLETE ☐ OTHER/EXPLANATION:

STAFF:

DATE: / /